

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

VIRGIN ISLANDS FOR PLASKETT

ADDRESS (number and street)

PO BOX 26502

Check if different
than previously
reported. (ACC)

Christiansted

VI

00824

2. FEC IDENTIFICATION NUMBER ▼

C

C00528182

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

VI

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2013

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michele Hyndman

Signature of Treasurer

Michele Hyndman

[Electronically Filed]

Date

M M / D D / Y Y Y Y

08

D D / Y Y Y Y

07

Y Y Y Y

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 8

Write or Type Committee Name

VIRGIN ISLANDS FOR PLASKETT

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5850.00	8850.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5850.00	8850.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6690.66	6790.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	6690.66	6790.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1944.84	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

VIRGIN ISLANDS FOR PLASKETT

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2013

To:

M M / D D / Y Y Y Y
06 / 30 / 2013

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

5850.00

8850.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions from individuals ▶

5850.00

8850.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

5850.00

8850.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

5850.00

8850.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6690.66	6790.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6690.66	6790.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2785.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5850.00
25. SUBTOTAL (add Line 23 and Line 24).....	8635.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6690.66
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1944.84

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 8
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
VIRGIN ISLANDS FOR PLASKETT

A. Full Name (Last, First, Middle Initial) Kevin Brandt		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2013	
Mailing Address 5001 Tamarind 28		Transaction ID : SA11AI.4386	
City	State	Zip Code	Amount of Each Receipt this Period 2600.00
St. Croix	VI	00820	
FEC ID number of contributing federal political committee.		C	
Name of Employer		Occupation Money Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00	
B. Full Name (Last, First, Middle Initial) Jeffrey LaiKind		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2013	
Mailing Address 860 Fifth Ave. Apt. 104		Transaction ID : SA11AI.4385	
City	State	Zip Code	Amount of Each Receipt this Period 500.00
New York	NY	10065	
FEC ID number of contributing federal political committee.		C	
Name of Employer		Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
C. Full Name (Last, First, Middle Initial) Brad Lenhart		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 11 / 2013	
Mailing Address P.O. Box 25248 GBS		Transaction ID : SA11AI.4387	
City	State	Zip Code	Amount of Each Receipt this Period 1000.00
St. Croix	VI	00824	
FEC ID number of contributing federal political committee.		C	
Name of Employer		Occupation Money Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	
SUBTOTAL of Receipts This Page (optional).....		4100.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 8

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

VIRGIN ISLANDS FOR PLASKETT

Full Name (Last, First, Middle Initial)

Nichols Newman

Mailing Address 1131 King Street

City

Christiansted

State

VI

Zip Code

00820

FEC ID number of contributing federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 18 / 2013

Transaction ID : SA11AI.4391

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Clive C. River

Mailing Address Nisky Center 233

City

St. Thomas

State

VI

Zip Code

00802

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 16 / 2013

Transaction ID : SA11AI.4382

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Larry William

Mailing Address P.O. Box 24150 GBS

City

St. Croix

State

VI

Zip Code

00824

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Money Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 13 / 2013

Transaction ID : SA11AI.4381

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

5850.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 8

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

VIRGIN ISLANDS FOR PLASKETT

Full Name (Last, First, Middle Initial)

A. Eugene A. Petersen

Mailing Address 41 King St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		03		2013

City	State	Zip Code
St. Croix	VI	00841

Purpose of Disbursement
Band Down Pay (STT)

007

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4280

Candidate Name

VIRGIN ISLANDS FOR PLASKETTCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: VI District: 00

Full Name (Last, First, Middle Initial)

B. STACEY PLASKETT

Mailing Address PO BOX 1006

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2013

City	State	Zip Code
FREDERICKSTED	VI	00841

Purpose of Disbursement
Travel and expenses (NYC)

002

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.4285

Candidate Name

VIRGIN ISLANDS FOR PLASKETTCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: VI District: 00

Full Name (Last, First, Middle Initial)

C. STACEY PLASKETT

Mailing Address PO BOX 1006

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2013

City	State	Zip Code
FREDERICKSTED	VI	00841

Purpose of Disbursement
Reimbursement for travel expenses

002

Amount of Each Disbursement this Period

1032.85

Transaction ID : SB17.4287

Candidate Name

VIRGIN ISLANDS FOR PLASKETTCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: VI District: 00

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4032.85

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 8

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

VIRGIN ISLANDS FOR PLASKETT

Full Name (Last, First, Middle Initial)

A. Seabornne Airlines

Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate travel to St. Thomas

002

Category/
Type

Candidate Name

VIRGIN ISLANDS FOR PLASKETT

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: VI District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2013

Amount of Each Disbursement this Period

118.00

Transaction ID : SB17.4291

B. Seabornne Airlines

Mailing Address

City State Zip Code

Purpose of Disbursement
Cash placed in Seabornne account

002

Category/
Type

Candidate Name

VIRGIN ISLANDS FOR PLASKETT

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: VI District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2013

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4297

C. Two Plus Two

Mailing Address

City State Zip Code

Purpose of Disbursement
General Meeting

001

Category/
Type

Candidate Name

VIRGIN ISLANDS FOR PLASKETT

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: VI District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2013

Amount of Each Disbursement this Period

550.00

Transaction ID : SB17.4298

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2168.00

6200.85